

L17000258806

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

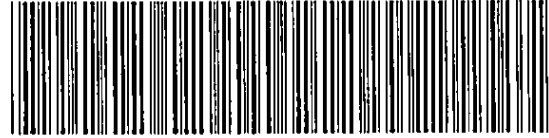
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 1, 2020

COGENCY GLOBAL INC

SUBJECT: AMLE VENTURES LLC
Ref. Number: L17000258806

We have received your document for AMLE VENTURES LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FLORIDA CORPORATION, but your entity is a FLORIDA LLC. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Octavia L Simmons
Regulatory Specialist II Supervisor

Letter Number: 420A00009011

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2020 MAY -4 PM 12:47

DEPT. OF STATE
TALLAHASSEE, FLORIDA



COGENCYGLOBAL

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 04/29/2020

Name: Marcel Ogbonna-Amu

Reference #: 1208175

Entity Name: AMLE VENTURES LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other _____

ANY ISSUES, CALL
MARCEL:

(518) 213 - 0826

Thank you!

Authorized Amount: \$25.00

Signature: Marcel Ogbonna-Amu

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: <u>AMLE VENTURES LLC</u>	
2. (a) <u>5645 CORAL RIDGE DRIVE, SUITE 471</u> Principal office address of limited liability company: <i>(Note: <u>MUST BE STREET ADDRESS</u>)</i> <u>CORAL SPRINGS</u> <u>FL 33076</u> <u>12/20/2017</u>	(b) <u>5645 CORAL RIDGE DRIVE, SUITE 471</u> Mailing address of limited liability company: <i>(Note: <u>MAY BE POST OFFICE BOX</u>)</i> <u>CORAL SPRINGS</u> <u>FL 33076</u> <u>L17000258806</u>
3. Date of filing/registration in Florida	4. Document number
5. (a) <u>NRAI SERVICES, INC.</u> Registered Agent and Registered Office shown on the records of the Florida Dept. of State: <u>1200 S PINE ISLAND RD</u> Registered Office Address <i>(MUST BE FLORIDA STREET ADDRESS)</i> <u>PLANTATION, FL 33324</u>	
(b) <u>COGENCY GLOBAL INC.</u> Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>115 North Calhoun Street, Suite 4</u> <u>NEW Registered Office Address</u> : <u>Tallahassee, FL 32301</u>	

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

<u>/s/Paul Lepine</u> Signature of a member or authorized representative of a member	<u>Paul Lepine</u> Printed or typed name of signer
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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

/s/Eric Hood
Signature of Registered Agent